

## **Application Data Sheet**

### **Application Information**

<b>Application Type:</b>	Regular
<b>Subject Matter:</b>	Utility
<b>Suggested Classification:</b>	None
<b>Suggested Group Art Unit:</b>	None
<b>CD-ROM or CD-R?:</b>	None
<b>Title:</b>	SURFACE COATED SPHERICAL SLIP JOINT FOR FORMING A SEALED INTERFACE AND METHOD OF FABRICATION
<b>Attorney Docket Number:</b>	85937.000006
<b>R quest for Early Publication?:</b>	No
<b>Request for Non-Publication?:</b>	No
<b>Suggested Drawing Figure:</b>	1
<b>Total Drawing Sheets:</b>	2
<b>Small Entity?:</b>	Yes
<b>Secrecy Order in Parent Application?</b>	No

### **Applicant Information**

<b>Applicant Authority Type:</b>	Inventor
<b>Primary Citizenship Country:</b>	US
<b>Status:</b>	Full Capacity
<b>Given Name:</b>	S. Scott
<b>Middle Name:</b>	
<b>Family Nam :</b>	Zolnier
<b>City of R sidence:</b>	Scottsville

**State or Province of Residence:** NY  
**Country of Residence :** US  
**Street of mailing address:** 249 Briarwood Lane  
**City of mailing address:** Scottsville  
**State or Province of mailing address:** NY  
**Country of mailing address::** US  
**Postal or Zip Code of mailing address:** 14546

**Applicant Authority Type:** Inventor  
**Primary Citizenship Country:** US  
**Status:** Full Capacity  
**Given Name:** Clifford  
**Middle Name:** W.  
**Family Name:** Rabidoux  
**City of Residence:** Rochester  
**State or Province of Residence:** NY  
**Country of Residence:** US  
**Street of mailing address:** 7 Audabon Terrace  
**City of mailing address:** Rochester  
**State or Province of mailing address:** NY  
**Country of mailing address:** US  
**Postal or Zip Code of mailing address:** 14624

**Applicant Authority Type:** Inventor  
**Primary Citizenship Country:** US

**Status:** Full Capacity  
**Given Name:** Charles  
**Middle Name:** E.  
**Family Name:** Aldridge  
**City of Residence:** Scottsville  
**State or Province of Residence:** NY  
**Country of Residence:** US  
**Street of mailing address:** 249 Briarwood Lane  
**City of mailing address:** Scottsville  
**State or Province of mailing address:** NY  
**Country of mailing address:** US  
**Postal or Zip Code of mailing address:** 14546

## **Correspondence Information**

**Correspondence Customer Number:** 23387  
**Name:**  
**Street of mailing address:**  
**City of mailing address:**  
**State or Province of mailing address:**  
**Postal or Zip Code of mailing address:**  
**Phone number:**  
**Fax Number:**  
**E-Mail address:**

**Representative  
Information**

<b>R representative Customer Number:</b>	23387	
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**Domestic Priority  
Information**

<b>Application:</b>	<b>Continuity Type:</b>	<b>Parent Application:</b>	<b>Parent Filing Date:</b>

**Foreign Priority  
Information**

<b>Country:</b>	<b>Application Number:</b>	<b>Filing Date:</b>	<b>Priority Claimed:</b>

**Assignee Information**

**Assignee name:** Heany Industries, Inc.  
**Street of mailing address:** 249 Briarwood Lane  
**City of mailing address:** Scottsville  
**State or Province of mailing  
address:** NY  
**Country of mailing address:** US  
**Postal or Zip Code of mailing  
address:** 14546